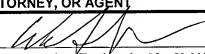


TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/010,426	
	Filing Date	November 8, 2001	
	First Named Inventor	Brad R. LEWIS et al.	
	Group Art Unit	2193	
	Examiner Name	Insun Kang	
Total Number of Pages in This Submission	11	Attorney Docket Number	30014200-1006

ENCLOSURES (check all that apply)						
<input checked="" type="checkbox"/> Transmitted herewith is Amendment "D" in response to the Office action of November 14, 2006.						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	24	-	28	0	<input type="checkbox"/> x \$25.00 <input checked="" type="checkbox"/> x \$50.00	\$0.00
INDEPENDENT CLAIMS	4	-	5	0	<input type="checkbox"/> x \$100.00 <input checked="" type="checkbox"/> x \$200.00	\$0.00
APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$180.00 <input checked="" type="checkbox"/> x \$360.00 ONE TIME	\$0.00
				TOTAL ADDITIONAL FEE FOR THIS AMENDMENT		\$0.00
<input type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated _____ by one month(s) for a fee of \$_____ so that the period for response is extended to _____ under 37 C.F.R. § 1.136.						
<input type="checkbox"/> The amount of \$_____ for the Terminal Disclaimer under 37 C.F.R. § 1.20(d) is included in the enclosed credit card payment form to charge.						
<input type="checkbox"/> The enclosed credit card payment form to charge the amount of \$_____ is to cover the total claim fee and other applicable fees.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
14. <input checked="" type="checkbox"/> Customer No. 58328						
Dated: _____				 A. Wesley Ferrebee (Registration No. 51,312)		

CERTIFICATE OF MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date indicated below.	
Dated: _____	_____